

Registration Deadline: September 2, 2003

Company Information: Please complete	te the information <u>exactly</u> as you would like it to ap	ppear in conference materials.
Company:		
	State:	
Telephone:	Fax:	
Principal Contact:	Title:	
E-mail:		
Company web site:	ink your company web site from the conference	
Signature:Al	ll correspondence will be with the principal co	ntact.
	imentary conference registration:	
Names of individuals staffing the bo	ooth:	
Individuals will be invoiced \$150 ea	 nch.	
Brief explanation of services your con	mpany offers:	
Cancellation/Refund Policy: Exhibit refund.	tor cancellations made in writing and received	by September 8, 2003 will receive a 50%
	Other Opportunities	
Advertisements: Please indicate size: ☐ Full-Page	e - \$500	Page - \$175
Promotional Brochures: Please indicate if you would like y ☐ Yes ☐ No	our company's promotional brochures inserted	d in the conference bags for a \$100 fee.
Method of Payment:		
	Friends of the Missouri Women's Council.	Overnight

Please complete & return to: Missouri Division of Workforce Development

Please Invoice Purchase Order Number: _____

☐ Total Enclosed / Invoiced

Attn: Workforce Development Conference

P.O. Box 1087

Jefferson City, MO 65102-1087

Overnight
accommodations at
Tan-Tar-A may be made
by calling
800.826.8272
or
573.348.3131.